

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Morton, K.
 App. No. : 09/870402
 Filed : May 30, 2001
 For : NONINVASIVE
 INTRADUCTAL FLUID
 DIAGNOSTIC SCREEN
 Examiner : Davis, R.
 Art Unit : 1651

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 1, 2004

(Date)

Rose M. Thiessen, Reg. No. 40,202

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

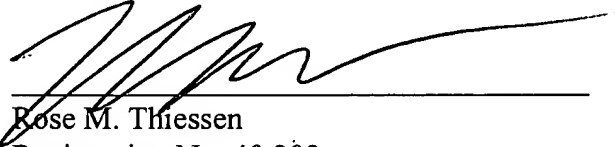
- (X) Amendment in 6 pages.
- (X) Declaration Under 37 CFR §1.132 of Kevin Morton.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	25 - 40 = 0	2202 (\$9)	0 x 9 =	\$0
Independent Claims	1 - 8 = 0	2201 (\$43)	0 x 43 =	\$0
Multiple Claim		2203 (\$145)		\$0
1 Month Extension		2251 (\$55)		\$0
2 Month Extension		2252 (\$210)		\$0
3 Month Extension		2253 (\$475)		\$475
			TOTAL FEE DUE	\$475

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$475 is enclosed.

- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Rose M. Thiessen
Registration No. 40,202
Attorney of Record
Customer No. 20,995
(619) 235-8550